

PTO/SB/08A INFORMATION DISCLOSURE STATEMENT BY APPLICANT (use as many sheets as necessary)				Complete if Known	
				Application Number	10/694,448
				Filing Date	10/27/2003
				Confirmation Number	8896
				First Named Inventor	Kathleen C.M. Campbell
				Group Art Unit	1614
Sheet	1	of	1	Examiner Name	Michel Graffeo James
				Attorney Docket No.	SIU 7398 Anderson

U.S. PATENT DOCUMENTS

Examiner Initials*	Cite No. ¹	U.S. Patent Document		Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document MM-DD-YYYY
		Number	Kind Code (if known)		

FOREIGN PATENT DOCUMENTS

Examiner Initials	Cite No. ¹	Foreign Patent Document			Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document MM-DD-YYYY	T ²
		Office	Number ⁴	Kind Code (if known)			

OTHER ART - NON PATENT LITERATURE DOCUMENTS

Examiner Initials	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published	T ³
	110	SCHWENKA et al., "Mucositis: Oral, Esophageal and Gastrointestinal Problems and Solutions" Cancer Supportive Care Programs, www.cancersupportivecare.com.	
		NO DATE	

Examiner Signature	/James Anderson/	Date Considered	04/02/2009
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 809. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Unique citation designation number. * Enter Office that issued the document, by the two-letter code (WIPO Standard). * For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. * Applicant is to place a check mark here if English Translation is attached or place an "A" here if English language abstract is attached.

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